FEC FORM 1

01507270200230340

STATEMENT OF ORGANIZATION

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15 JUL 24 PH 4: 34

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Walter Osborne (Campaign		1 1 1 1 1	
ADDRESS (number and street)	2321 Red Eml	per Rd		
(Check if address is changed)	Oviedo		FL	32765 9766
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e	-mail address)		
(O) 11 1/4 and discourse	WalterSenate	@att • net 📊		
(Check if address is changed)				
COMMITTEE'S WEB PAGE ADI	DRESS (URL)			
	_I WalterSenate	ę com		
(Check if address is changed)		1 1 1 1 1 1 1 1		
2. DATE 07 ^M / 20	2015			
3. FEC IDENTIFICATION NU	Ј МВЕР С			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	nis Statement and to the bes	t of my knowledge and belie	f it is true, correc	ct and complete.
Type or Print Name of Treasure	Walter Osboi	ne		
Signature of Treasurer <u>W</u>	alter Osborne	-	Date 0	7" / 20° / 2015 Y
NOTE: Submission of false, errone	eous, or incomplete information			o the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Communication Free 800-424-9530	ission	FEC FORM 1 (Revised 02/2009)

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	F	EC For	rm 1 (Revised 02/2009)	Page 2	
5.			COMMITTEE		
		Ididate Committee:			
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)		
	(p)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)		
	Name Candi	-	Walter Osborne		
	Candi Party	idate Affiliatio	on NPA Sought: House X Senate President	State FL	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District	
	Name Candi				
	Part	y Con	nmittee:		
	(d)			nocratic, ublican, etc.) Party.	
	Polit	ical A	action Committee (PAC):		
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:	
			Corporation Corporation w/o Capital Stock La	bor Organization	
			Membership Organization Trade Association Co	operative	
			In addition, this committee is a Lobbyist/Registrant PAC.		
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund or party	
	In addition, this committee is a Lobbyist/Registrant PAC.				
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
	laint	Eund	draising Representative:		
		runu —	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or	more political	
	(g)		committees/organizations, at least one of which is an authorized committee of a federal candidate.	inore political	
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political	
		Com	mittees Participating in Joint Fundraiser		
		1.	FEC ID number C	manufaccandimental manufaccand	
		2.	FEC ID number C		
		3.	FEC ID number C		
		4.			

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Write or Type Committee Name	
Walter Osborne Campaign	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
MONE	
Mailing Address	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in books and records. 	possession of committee
Full Name Walter Osborne	
Mailing Address 2321 Red Ember Rd	1 1 1 1 1 1 1
Oviedo	7,65
	1-1-1-1-1-1
Title or Position CITY STATE	ZIP CODE
Treasurer Telephone number 407 -	- [808
 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer). 	a name and address of
Full Name Walter Osborne of Treasurer	
Mailing Address 2321 Red Ember Rd	
Oviedo FL 32	765 _ 9766
CITY STATE Title or Position	ZIP CODE

Telephone number

Full Name of Designated Agent			
Mailing Address			1 1 1 1 1 1 1 1 1 1
•			
	1	1 1 1	1 + 1-1
	CITY	STATE	ZIP CODE
Title or Position			. - -
		ne number <u>!</u>	
	Depositories: List all banks or other depositories in which the coxes or maintains funds. Depository, etc.	ommittee deposits f	unds, holds accounts, rents
			1 1 1 1 1 1 1 1 1 1 1
Mailing Address	1825 East Broadway Street		
	[Oviędp , , , , , , , , , , , , , , , , , , ,	LJ FL	[32765] _ [
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
Mailing Address			
Mailing Address			
Mailing Address			

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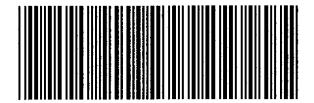
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United States Senate

OFFICE OF THE SECRETARY

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